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=> s testosterone and female and sexual (1P) desire
         51836 TESTOSTERONE
        117790 FEMALE
         25166 SEXUAL
          4597 DESIRE
           115 SEXUAL (1P) DESIRE
L1           7 TESTOSTERONE AND FEMALE AND SEXUAL (1P) DESIRE

=> d l1 1-7 bib, ab

L1   ANSWER 1 OF 7  CAPLUS  COPYRIGHT 2003 ACS
AN   2003:77549  CAPLUS
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TI Methods and compositions of as-needed orally active androgenic agents and other active agents such as vasodilators or dopamine agonists to enhance **female sexual desire** and responsiveness
IN Wilson, Leland F.; Tam, Peter Y.
PA USA
SO U.S. Pat. Appl. Publ., 17 pp.
CODEN: USXXCO
DT Patent
LA English
FAN.CNT 1

	PATENT NO.	KIND	DATE	APPLICATION NO.	DATE
PI	US 2003022875	A1	20030130	US 2001-919471	20010727
PRAI	US 2001-919471		20010727		

AB A method is provided for enhancing a **female** individual's **sexual desire** and responsiveness. The method involves oral administration of a dosage form contg. an effective amt. of an orally active androgenic agent, and is on an as-needed basis rather than involving chronic pharmacotherapy. The method further comprise addnl. active agents, such as vasodilators or dopamine agonists, to be administered with, prior or after the androgenic agent. Oral pharmaceutical compns., dosage forms and kits for carrying out the method are provided as well. Prevention of vaginal atrophy, itching, dryness and dyspareunia is also claimed by the use of the described methods.

L1 ANSWER 2 OF 7 CAPLUS COPYRIGHT 2003 ACS
AN 2002:90612 CAPLUS
DN 136:145563
TI As-needed administration of an androgenic agent to enhance **female sexual desire** and responsiveness
IN Wilson, Leland F.; Tam, Peter Y.
PA USA
SO U.S. Pat. Appl. Publ., 19 pp., Cont.-in-part of U.S. 6,306,841.
CODEN: USXXCO
DT Patent
LA English
FAN.CNT 4

	PATENT NO.	KIND	DATE	APPLICATION NO.	DATE
PI	US 2002013304	A1	20020131	US 2001-919472	20010727
	US 5877216	A	19990302	US 1997-959064	19971028
	US 6306841	B1	20011023	US 2000-539484	20000330
PRAI	US 1997-959057	B2	19971028		
	US 1997-959064	A2	19971028		
	US 1998-181316	B1	19981027		
	US 2000-539484	A2	20000330		

AB A method is provided for enhancing a **female** individual's **sexual desire** and responsiveness. The method involves administration of a pharmaceutical formulation contg. an effective amt. of an androgenic agent, wherein administration is on an as-needed basis rather than involving chronic pharmacotherapy. Local delivery may be accomplished via administration to the vagina, vulvar area or urethra of the individual, although oral administration is preferred for those androgenic agents that are orally active. Formulations and kits for carrying out the method are provided as well. The androgenic agents can be used in combination with at least one addnl. active agent, such as a vasodilator.

L1 ANSWER 3 OF 7 CAPLUS COPYRIGHT 2003 ACS
AN 2001:650011 CAPLUS
DN 136:31747
TI Sex and context: hormones and primate sexual motivation

AU Wallen, Kim
CS Department of Psychology and The Yerkes Regional Primate Research Center, Emory University, Atlanta, GA, 30322, USA
SO Hormones and Behavior (2001), 40(2), 339-357
CODEN: HOBEAO; ISSN: 0018-506X
PB Academic Press
DT Journal; General Review
LA English
AB A review, with 92 refs. Gonadal hormones regulate the ability to copulate in most mammalian species, but not in primates because copulatory ability has been emancipated from hormonal control. Instead, gonadal hormones primarily influence **sexual** motivation. This sepn. of mating ability from hormonally modulated mating interest allows social experience and context to powerfully influence the expression of **sexual** behavior in nonhuman primates, both developmentally and in adulthood. For example, male rhesus monkeys mount males and females equally as juveniles, but mount females almost exclusively as adults. Having ejaculated with a **female** better predicted this transition to **female** mounting partners than did increased pubertal **testosterone** (T). It is proposed that increased pubertal T stimulates male **sexual** motivation, increasing the male's probability of **sexual** experience with females, ultimately producing a **sexual** preference for females. Eliminating T in adulthood reduces male **sexual** motivation in both humans and rhesus monkeys, but does not eliminate the capacity to engage in sex. In male rhesus monkeys the effects of reduced androgens on **sexual** behavior vary with social status and **sexual** experience. Human **sexual** behavior also varies with hormonal state, social context, and cultural conventions. Ovarian hormones influence **female sexual desire**, but the specific **sexual** behaviors engaged in are affected by perceived pregnancy risk, suggesting that cognition plays an important role in human **sexual** behavior. How the phys. capacity to mate became emancipated from hormonal regulation in primates is not understood. This emancipation, however, increases the importance of motivational systems and results in primate **sexual** behavior being strongly influenced by social context. (c) 2001 Academic Press.
RE.CNT 92 THERE ARE 92 CITED REFERENCES AVAILABLE FOR THIS RECORD
ALL CITATIONS AVAILABLE IN THE RE FORMAT

L1 ANSWER 4 OF 7 CAPLUS COPYRIGHT 2003 ACS
AN 2001:648564 CAPLUS
DN 135:327555
TI The effects of tibolone on vaginal blood flow, **sexual desire** and arousability in postmenopausal women
AU Laan, E.; van Lunsen, R. H. W.; Everaerd, W.
CS Department of Clinical Psychology, University of Amsterdam, Amsterdam, 1018 WB, Neth.
SO Climacteric (2001), 4(1), 28-41
CODEN: CLIMFC; ISSN: 1369-7137
PB Parthenon Publishing Group Ltd.
DT Journal
LA English
AB To compare the effects of 3 mo' tibolone treatment with the effects of placebo on **sexual** function (in particular, vaginal blood flow, and **sexual desire** and arousability) and climacteric symptoms in postmenopausal women. A randomized, double-blind, cross-over study was conducted in 38 postmenopausal women who received tibolone 2.5 mg/day and placebo. Vaginal blood flow during erotic stimulation by fantasy and film was measured using a vaginal photoplethysmograph and subjects completed **sexual** function questionnaires and daily diaries. Tibolone significantly increased baseline vaginal pulse amplitude (VPA) levels compared with placebo. There were significant

treatment differences in VPA in favor of tibolone during fantasy periods but not during erotic film stimulation. Tibolone was assocd. with significant increases in **sexual desire**, and the frequency of arousability and of **sexual** fantasies compared with those with placebo. Vaginal lubrication was significantly improved on tibolone. Twenty-five of 38 (66%) subjects correctly guessed when they were on active treatment. Tibolone was well tolerated. Tibolone was assocd. with significant improvements in **sexual** function in postmenopausal women, reflecting both its estrogenic and androgenic properties. There were significantly greater increases in vaginal blood flow with tibolone in response to erotic fantasy but not film, suggesting two possible pathways of **female sexual** response.

RE.CNT 47 THERE ARE 47 CITED REFERENCES AVAILABLE FOR THIS RECORD
ALL CITATIONS AVAILABLE IN THE RE FORMAT

L1 ANSWER 5 OF 7 CAPLUS COPYRIGHT 2003 ACS
AN 2000:893622 CAPLUS
DN 134:126058
TI **Testosterone** influences libido and well being in women
AU Davis, S. R.; Tran, J.
CS Jean Hailes Foundation, Clayton, Victoria, 3168, Australia
SO Trends in Endocrinology and Metabolism (2001), 12(1), 33-37
CODEN: TENME4; ISSN: 1043-2760
PB Elsevier Science Ltd.
DT Journal; General Review
LA English
AB A review with 62 refs. There is increasing awareness of the significant and varied actions of endogenous androgens in women, and acknowledgment that women might experience symptoms secondary to androgen deficiency. There is also substantial evidence that prudent **testosterone** replacement is effective in relieving both the phys. and psychol. symptoms of androgen insufficiency in clin. affected women. However, the understanding of the actions of **testosterone** in women is incomplete, with no consensus as to what constitutes either biochem. or clin. **testosterone** deficiency. The focus of the limited research into **testosterone** replacement has been on sexuality, primarily **sexual desire**. However, the influence of **testosterone** on mood and well being also requires further exploration.

RE.CNT 52 THERE ARE 52 CITED REFERENCES AVAILABLE FOR THIS RECORD
ALL CITATIONS AVAILABLE IN THE RE FORMAT

L1 ANSWER 6 OF 7 CAPLUS COPYRIGHT 2003 ACS
AN 1989:450623 CAPLUS
DN 111:50623
TI Low **sexual desire** in women: the role of reproductive hormones
AU Schreiner-Engel, Patricia; Schiavi, Raul C.; White, Daniel; Ghizzani, Anna
CS Dep. Psychiatry, Mount Sinai Sch. Med., New York, NY, USA
SO Hormones and Behavior (1989), 23(2), 221-34
CODEN: HOBEAO; ISSN: 0018-506X
DT Journal
LA English
AB The hormonal milieu of 2 groups of subjects with markedly different levels of **sexual desire** was compared. Women ages 27-39 who met DSM III-R criteria for severe, persistent, and generalized loss of **desire** (hypoactive **sexual desire** disorder, HSD), but had no other current psychol. or medical problem, were compared to healthy, sexually active women. All subjects and spouses were interviewed extensively to det. the women's **sexual desire** and responsiveness. Blood samples were drawn every 3-4 days for 1 menstrual cycle and were analyzed by RIA for

testosterone, sex hormone-binding globulin (SHBG), estradiol, progesterone, prolactin, and LH. The HSD women's gonadal hormones fluctuated normally over the menstrual cycle, were within normal limits for each cycle phase, and were never different from those of controls. Neither **testosterone**, non-SHBG-bound **testosterone**, nor prolactin differentiated between the HSD women with the most and least severe HSD parameters (e.g., frequency of fantasy, masturbation, or **female**-initiated coitus), nor between women with lifelong and acquired HSD. Evidently, reproductive hormones are not important determinants of individual differences in the **sexual desire** of these euogonadal women.

L1 ANSWER 7 OF 7 CAPLUS COPYRIGHT 2003 ACS
AN 1979:521339 CAPLUS
DN 91:121339
TI Possible correlation between plasma androgen variations during the menstrual cycle and sexual behavior in the human **female**
AU Genazzani, A. R.; Devoto, M. C.; Cianchetti, C.; Pintor, C.; Facchinetti, F.; Mangoni, A.; Fioretti, P.
CS Sch. Med., Univ. Siena, Siena, Italy
SO Proceedings of the Serono Symposia (1978), 22(Clin. Psychoneuroendocrinol. Reprod.), 419-35
CODEN: PSSYDG; ISSN: 0308-5503
DT Journal
LA English
AB The blood plasma levels of gonadotropins, prolactin, and several steroids were measured throughout the menstrual cycle in a group of young volunteers. In addn. to the well-known variations in plasma LH, FSH, estradiol, progesterone, and 17-hydroxyprogesterone levels, typical changes were also found in some androgens. Dehydroepiandrosterone plasma levels were significantly higher in the early follicular and ovulatory phases than in the luteal phase. Androstenedione plasma levels increased progressively from the late follicular phase, reaching the highest values just prior to ovulation, remaining high during the early luteal phase and decreasing in mid-luteal phase. **Testosterone** plasma levels increased from early and mid to late follicular phase, reaching the highest concns. after ovulation, then decreasing to lower but stable values during the luteal phase. Significantly depressed plasma levels of dihydrotestosterone were found in the luteal when compared to the follicular phase. Apparently, there is an increase in plasma androgen levels at the end of follicular maturation and also around ovulation. The possible existence of androgen-related variations in **sexual desire** in fertile women was checked by means of a questionnaire, in group of sexually active, fertile Sardinian women, subdivided into 3 groups according to the type of contraception used: natural methods (A), chem. or phys. methods (B), and hormonal methods (pill). In both groups A and B, **sexual desire** showed 3 peak phases (early follicular, ovulatory, and premenstrual) and 3 depressed phases (menstrual, late follicular, and luteal). In these groups, the incidence of erotic dreams was lower in the follicular than in the luteal phase. In the group using the pill, the highest peak of **sexual desire** was found during the premenstrual phase. Moreover, **sexual desire** was increased in .apprx.1/2 of the pill users. On the basis of these results, it is possible to sustain the existence of a correlation between **sexual desire** and hormonal patterns (androgen levels, androgen/estrogen ratio, LH-RH concn. at the hypothalamic level) and psychol. factors (tendency to avoid the fertile, ovulatory period, and the days close to it because of difficulty in recognizing ovulation) during the menstrual cycle.

=> d l1 6,7 kwic

L1 ANSWER 6 OF 7 CAPLUS COPYRIGHT 2003 ACS
TI Low **sexual desire** in women: the role of reproductive hormones
AB The hormonal milieu of 2 groups of subjects with markedly different levels of **sexual desire** was compared. Women ages 27-39 who met DSM III-R criteria for severe, persistent, and generalized loss of **desire** (hypoactive **sexual desire** disorder, HSD), but had no other current psychol. or medical problem, were compared to healthy, sexually active women. All subjects and spouses were interviewed extensively to det. the women's **sexual desire** and responsiveness. Blood samples were drawn every 3-4 days for 1 menstrual cycle and were analyzed by RIA for **testosterone**, sex hormone-binding globulin (SHBG), estradiol, progesterone, prolactin, and LH. The HSD women's gonadal hormones fluctuated normally over the menstrual cycle, were within normal limits for each cycle phase, and were never different from those of controls. Neither **testosterone**, non-SHBG-bound **testosterone**, nor prolactin differentiated between the HSD women with the most and least severe HSD parameters (e.g., frequency of fantasy, masturbation, or **female**-initiated coitus), nor between women with lifelong and acquired HSD. Evidently, reproductive hormones are not important determinants of individual differences in the **sexual desire** of these euogonadal women.
IT Hormones
RL: BIOL (Biological study)
(of blood, in low **sexual desire** in women)
IT Ovarian cycle
(reproductive hormones of blood of women in, low **sexual desire** in relation to)
IT Blood
(reproductive hormones of, in low **sexual desire** in women)
IT Globulins, biological studies
RL: BIOL (Biological study)
(SHBG (sex hormone-binding globulin), **testosterone** binding by, in low **sexual desire** in women)
IT Sex
(activity, **female**, low desire for, in women, reproductive hormones of blood in relation to)
IT 50-28-2, Estradiol, biological studies 57-83-0, Progesterone, biological studies 58-22-0, **Testosterone** 9002-62-4, Prolactin, biological studies 9002-67-9, LH
RL: BIOL (Biological study)
(of blood, in low **sexual desire** in women)

L1 ANSWER 7 OF 7 CAPLUS COPYRIGHT 2003 ACS
TI Possible correlation between plasma androgen variations during the menstrual cycle and sexual behavior in the human **female**
AB . . . reaching the highest values just prior to ovulation, remaining high during the early luteal phase and decreasing in mid-luteal phase. **Testosterone** plasma levels increased from early and mid to late follicular phase, reaching the highest concns. after ovulation, then decreasing to. . . plasma androgen levels at the end of follicular maturation and also around ovulation. The possible existence of androgen-related variations in **sexual desire** in fertile women was checked by means of a questionnaire, in group of sexually active, fertile Sardinian women, subdivided into. . . contraception used: natural methods (A), chem. or phys. methods (B), and hormonal methods (pill). In both groups A and B, **sexual**

desire showed 3 peak phases (early follicular, ovulatory, and premenstrual) and 3 depressed phases (menstrual, late follicular, and luteal). In these. . . was lower in the follicular than in the luteal phase. In the group using the pill, the highest peak of **sexual desire** was found during the premenstrual phase. Moreover, **sexual desire** was increased in .apprx.1/2 of the pill users. On the basis of these results, it is possible to sustain the existence of a correlation between **sexual desire** and hormonal patterns (androgen levels, androgen/estrogen ratio, LH-RH concn. at the hypothalamic level) and psychol. factors (tendency to avoid the. .

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NEWS 4	Apr 09	ZDB will be removed from STN
NEWS 5	Apr 19	US Patent Applications available in IFICDB, IFIPAT, and IFIUDB
NEWS 6	Apr 22	Records from IP.com available in CAPLUS, HCAPLUS, and ZCAPLUS
NEWS 7	Apr 22	BIOSIS Gene Names now available in TOXCENTER
NEWS 8	Apr 22	Federal Research in Progress (FEDRIP) now available
NEWS 9	Jun 03	New e-mail delivery for search results now available
NEWS 10	Jun 10	MEDLINE Reload
NEWS 11	Jun 10	PCTFULL has been reloaded
NEWS 12	Jul 02	FOREGE no longer contains STANDARDS file segment
NEWS 13	Jul 22	USAN to be reloaded July 28, 2002; saved answer sets no longer valid
NEWS 14	Jul 29	Enhanced polymer searching in REGISTRY
NEWS 15	Jul 30	NETFIRST to be removed from STN
NEWS 16	Aug 08	CANCERLIT reload
NEWS 17	Aug 08	PHARMAMarketLetter(PHARMAML) - new on STN
NEWS 18	Aug 08	NTIS has been reloaded and enhanced
NEWS 19	Aug 19	Aquatic Toxicity Information Retrieval (AQUIRE) now available on STN
NEWS 20	Aug 19	IFIPAT, IFICDB, and IFIUDB have been reloaded
NEWS 21	Aug 19	The MEDLINE file segment of TOXCENTER has been reloaded
NEWS 22	Aug 26	Sequence searching in REGISTRY enhanced
NEWS 23	Sep 03	JAPIO has been reloaded and enhanced
NEWS 24	Sep 16	Experimental properties added to the REGISTRY file
NEWS 25	Sep 16	CA Section Thesaurus available in CAPLUS and CA
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NEWS 27	Oct 21	EVENTLINE has been reloaded
NEWS 28	Oct 24	BEILSTEIN adds new search fields
NEWS 29	Oct 24	Nutraceuticals International (NUTRACEUT) now available on STN
NEWS 30	Oct 25	MEDLINE SDI run of October 8, 2002
NEWS 31	Nov 18	DKILIT has been renamed APOLLIT
NEWS 32	Nov 25	More calculated properties added to REGISTRY
NEWS 33	Dec 02	TIBKAT will be removed from STN
NEWS 34	Dec 04	CSA files on STN
NEWS 35	Dec 17	PCTFULL now covers WP/PCT Applications from 1978 to date
NEWS 36	Dec 17	TOXCENTER enhanced with additional content
NEWS 37	Dec 17	Adis Clinical Trials Insight now available on STN
NEWS 38	Dec 30	ISMEC no longer available
NEWS 39	Jan 13	Indexing added to some pre-1967 records in CA/CAPLUS
NEWS 40	Jan 21	NUTRACEUT offering one free connect hour in February 2003
NEWS 41	Jan 21	PHARMAML offering one free connect hour in February 2003
NEWS 42	Jan 29	Simultaneous left and right truncation added to COMPENDEX, ENERGY, INSPEC

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